The Manchester Briefing on COVID-19

International lessons for local and national government recovery and renewal

Ninth briefing: Week beginning 1st June 2020

Produced by Professor Duncan Shaw, Dr Jennifer Bealt, David Powell, Professor Ruth Boaden, The University of Manchester, UK

What is ‘The Manchester Briefing on COVID-19’?
The Manchester Briefing on COVID-19 is aimed at those who plan and implement recovery from COVID-19, including government emergency planners and resilience officers.

Each week we bring together international lessons and examples which may prompt your thinking on the recovery from COVID-19, as well as other information from a range of sources and a focus on one key topic. The lessons are taken from websites (e.g. UN, WHO), documents (e.g. from researchers and governments), webinars (e.g. those facilitated by WEF, GCRN), and other things we find.

We aim to report what others have done without making any judgement on the effectiveness of the approaches, or recommending any specific approach.

This week
We have provided four briefings:

Briefing A: Focus of the week – Developing Recovery Actions for COVID-19
Briefing B. Lessons you may find helpful from across the world
Briefing C: Case Study – Supporting care homes in the UK
Briefing D: Useful webinars

Other information
Please register at ambs.ac.uk/covidrecovery if you would like to receive future briefings. If this is the first briefing you have received and would like to be sent the previous ones, please email events@manchester.ac.uk.

If you would be willing to contribute your knowledge to the briefing (via a 30-minute interview) please contact Duncan.Shaw@manchester.ac.uk

We also produce a blog series which you can access here along with other news about our team and our work.
Briefing A: Focus of the week - Developing Recovery Actions for COVID-19

Introduction
This briefing builds on The Manchester Briefing (TMB) 8 to discuss more about the effects and impacts of, and opportunities arising from, COVID-19; what these mean for developing recovery strategies and for Local Resilience Forums (LRFs) which plan the response to crisis.

LRFs, Local Authorities, Recovery and Renewal
LRFs will need to recover operations and maintain their readiness for a second wave as we continue to learn to ‘live with COVID-19’\(^1\). For example, they will need to ensure the availability of logistics support, shielding operations, outbreak control measures, and preparedness for concurrent or future emergencies.

Local Authorities (LAs) will lead renewal on behalf of the recovery partnership and co-ordinate planning of non-clinical recovery\(^1\) and renewal. Local Authorities are well placed to do this as ‘lead responders’ with responsibility for public health, adult and children’s services, economic development, voluntary sector coordination, community and democratic ‘place’ and ‘people’ duties. Thus, LAs will be expected to develop renewal strategies for their locales based on Impact Assessments of the effects, impacts and opportunities of Covid-19 on their local areas. Uncertainty about future funding, as well as individual, organisational, partnership and community fatigue, makes identifying and prioritising action to address the effects and impact all the more challenging.

COVID-19 offers LAs a limited time for strategic and democratic opportunities to adopt renewed ways of improving health, economy and society – and it will be for LAs and partners to decide whether the moment to address effects, impacts, and opportunities is seized, or allowed to lapse. As we described in Week 8 of The Manchester Briefing, the mechanism to identify the effects, impacts, and opportunities is the Impact Assessment.

Identifying prioritised action
The Recovery Coordination Group (RCG) can commission experts to consider a wide range of topics related to COVID-19 and identify the effects, impacts, and opportunities created. This information then needs to be grouped into themes before actions can be identified and planned.

a) Types of impact and overall themes
The table below provides a menu of topics to consider once information has been gathered for an Impact Assessment – and

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\(^1\) See The Manchester Briefing Week 8
Annex A - Menu of areas to consider in an Impact Assessment - provides illustrations of this menu with more detail about each topic. The menu is structured around our 6 core themes and can be used by RCG to decide what topics are relevant to their locale and to enable the development of appropriate action plans.

**Menu of topics to consider within each theme (details and examples in Annex A)**

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<th>Infrastructure</th>
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<td>• Economic strategy (national and local)</td>
<td>• Infrastructure providers</td>
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<td>• Volunteers</td>
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<td>• Urban infrastructure</td>
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<table>
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<tr>
<th>Environment</th>
<th>Communication</th>
<th>Governance and legislation</th>
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<tr>
<td>• Urban planning</td>
<td>• General communications</td>
<td>• Legislation</td>
</tr>
<tr>
<td>• General environment</td>
<td>• Targeted communications</td>
<td>• Planning for recovery</td>
</tr>
<tr>
<td>• Clean energy</td>
<td>• Connectivity between Health and the wider system</td>
<td>• Risk</td>
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<th>Environment (continued)</th>
<th>Communication (continued)</th>
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As the coordinating body for the Impact Assessment, RCG will receive a large number of effects, impacts, and opportunities from those who have been commissioned to input. These need to be grouped into *action areas* under each theme: a group of effects, impacts, and opportunities from across different respondents and topics in the menu, rather than as unrelated actions which lack a joined-up approach.

### b) Identifying consequences and action areas

Each *action area* will relate to one of three types of consequence from COVID-19 that actions may address (as described in Week 8 of The Manchester Briefing). Each consequence may be positive or negative and could transcend the phases of response, recovery and renewal:

- **Direct consequence** – primary effect of the COVID-19 health crisis. Many direct consequences will be addressed as a **transactional** activity by a single organisation or multi-agency partnership of tactical leaders,
although they may also require wider and strategic actions. For example, the effect from COVID-19 of LAs having to support shielded people who are clinically extremely vulnerable.

- **Wider consequence** – secondary effect which arises from a direct consequence. Many wider consequences will be addressed as a transactional activity by a multi-agency partnership of tactical leaders and will therefore need a wider range of actions. For example, having to manage spontaneous volunteers to support shielded people with delivering food/medicines and provide befriending phone calls.

- **Strategic consequence** – impact or opportunity which is of medium/long-term and broader significance. Many strategic consequences will be addressed as transformational recovery or renewal activity by a multi-agency partnership of strategic leaders. For example, recognising the fragility of the voluntary sector from COVID-19, commissioning voluntary organisations to support shielded people on an ongoing basis, thereby bolstering the organisations’ financial viability.

**Transactional** activities/actions to address the effects of COVID-19 may be carried out by the Local Resilience Forum² (LRF), but transformational activities to address strategic impacts and opportunities are likely to require a broader strategic partnership.

Each effect, impact and opportunity identified through the Impact Assessment must be mapped onto the consequences (direct, wider and strategic), recognising that most effects will have mainly direct and wider consequences, whilst impacts and opportunities will mainly have strategic consequences (see Figure), but that all possible links should be considered.

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**c) Developing recovery action plans**

The next task is to think about action plans for recovery and how to prioritise, allocate and monitor the action areas that should drive recovery. Mirroring the types of consequences, action areas will be actioned through one of three types of recovery actions:

- **Direct Recovery Action** – addressing a direct effect of COVID-19 by the delivery of relatively straightforward transactional actions by a single organisation.
- **Wider Recovery Action** – addressing a wider effect of COVID-19 by the delivery of a series of transactional actions that may be implemented by a single organisation or coordinated by a multi-agency partnership. Some aspects of impact and opportunity may also be addressed in these plans.
- **Strategic Recovery Action** – addressing a strategic impact or opportunity of COVID-19 by the delivery of a complex web of transformational actions as part of a renewal agenda that requires wider strategic and political multi-agency partnership. Some aspect of the effects may also be addressed in these plans.

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² [https://www.gov.uk/guidance/local-resilience-forums-contact-details](https://www.gov.uk/guidance/local-resilience-forums-contact-details)
These recovery actions show that RCGs can deal with the effects, impacts, and opportunities found through the Impact Assessment at three levels of comprehensiveness i.e. deal with each as a transactional or transformational activity depending on the desired scale of activity. We illustrate this below.

Dealing with effects

An effect can be addressed by a direct, wider or strategic recovery action depending on the desired scale of intervention. As an example, we work through the effect of “New cases of infection resulting from crowded public transport into the city at peak times” as shown in Action Area Example 1:

| Action Area Example 1. |  |
|------------------------|  |
| **Infrastructure (Transport):** | For the effect of “New cases of infection resulting from crowded public transport into the city at peak times”… |
| **Direct Recovery Action:** | Provide travellers with face masks, disposable gloves, social distancing markings on the floor of public transport, and encourage behaviour change through media campaign |
| **Wider Recovery Action:** | Work with business hubs to provide funded training and support to organisations on how they can convert their processes to exploit existing digital infrastructure so more staff can work from home |
| **Strategic Recovery Action:** | Reduce demand for public transport by encouraging more uptake of cycle-to-work through the provision of new cycle routes, new safe cycle storage, and tax relief incentives |

Dealing with impacts or opportunities

An impact can also be addressed by a direct, wider or strategic recovery action, but only a strategic recovery action can approach the impact comprehensively. As an example, we work through the impact of “current guidance on response and recovery is not fit for purpose to a Health-led emergency” as shown in Action Area Example 2:

| Action Area Example 2. |  |
|------------------------|  |
| **Governance (Emergency planning):** | For the impact of “current guidance on response and recovery is not fit for purpose to a Health-led emergency” |
| **Direct Recovery Action:** | Conduct a debrief to identify where the current guidance was not sufficient and work through Strategic Coordination Group (SCG)/RCG to push those lessons up to national government to outline the need to revise the guidance |
| **Wider Recovery Action:** | Capitalise on partnerships with LRFs to jointly understand the limitations of existing response and recovery guidance, and collaborate to revise that guidance to reflect the sector’s learning from health-led emergencies |
| **Strategic Recovery Action:** | Revise the laws underpinning emergency response structures to mandate closer working relationships, and reconceptualise guidance to build a new resilience relationships between LRFs/Health/Government |

A strategic opportunity can also be addressed by a direct, wider or strategic recovery action, but only a strategic recovery action can approach the opportunity comprehensively. As an example, we work through the opportunity of “capitalise on what COVID-19 has done to strengthen ‘good neighbours’ and bond communities through self-generated activities” as shown in Action Area Example 3:

| Action Area Example 3. |  |
|------------------------|  |
| **Humanitarian Assistance (Community Engagement):** | For the opportunity of “capitalise on what COVID-19 has done to strengthen ‘good neighbours’ and bond communities through self-generated activities” |
| **Direct Recovery Action:** |  |
| **Wider Recovery Action:** |  |
| **Strategic Recovery Action:** |  |
Run neighbourhood gatherings to galvanise community cohesion, celebrate activities during response, and encourage activities during recovery
Identify community initiatives that will deliver the strategic priorities of the recovery partnership, fund those using existing resources, and then measure their impact on the partnership’s performance
Repurpose community liaison officers to work with selected communities, secure seed funding for their self-generated activities, and focus on rebalancing inequalities and other partnership aims

So, what does all this mean?

RCG has a decision to make on every action area – whether to pursue it and, if so, whether to pursue it as a quick Direct Recovery Action, a Wider Recovery Action, or a Strategic Recovery Action. In part, this decision will be informed by the following factors:
- Likelihood that the action will achieve the desired effect
- Availability of capability and capacity to achieve the desired effect
- Duration and effort needed to achieve the desired effect
- Partnership’s motivation for change and general fatigue with COVID-19
- Impact on reputation from (not) pursuing the recovery action
- Resources available, including the Government’s approach to funding recovery

These factors will help RCG to decide a priority for each action area.

The overall process

The flow chart below shows what RCG needs to consider in the early stages of recovery and renewal. It summarises the thinking we have developed since the start of TMB:
Annex A - Menu of areas to consider in an Impact Assessment

Below we provide a menu of areas where an Impact Assessment could be commissioned. The menu can be used by RCG to decide what impact areas are relevant to their context and should be considered through an impact assessment. The list below is formed of three components:

- **Impact theme**: The menu is organised around our six themes: Humanitarian Assistance (Including health); Economic; Infrastructure; Environment; Communication; Governance and legislation
- **Impact area**: For each theme, we identify the area where recovery may be needed
- **Examples**: For each impact area, we provide two examples from our dataset which could be considered by the impact assessment. The italic title of these bullets can be put into the question “What has been the impact of COVID-19 on [content].” and the following content provides additional insight to what this could consider.

### Humanitarian Assistance (Including health)

**Vulnerable people**
- **Support to shielded people** – food/supermarket delivery, medicine delivery, befriending, cash society
- **Knowledge of at-risk groups** – hard to reach groups (homeless, asylum seekers), data sharing

**Volunteers**
- **Spontaneous volunteers** – organised volunteering, self-organising networks, governance, safeguarding
- **Corporate offers of support** – matching offers of help with need, governance, donations management

**Community engagement**
- **Community capacities** – changing identity/pride, community schemes, online networks, use of social areas
- **Community needs** – wider inequalities, lived experiences of COVID-19, fragile community groups

**Health and wellbeing**
- **Primary/elective care** – demand (surges, backlogs, delays), health inequalities, personal resilience
- **Mental health** – COVID-related causes of stresses, capability and capacity of services, resilience of services

**Public protection**
- **Need for protection** – fear of infection and second wave, adherence to protection advice, enforcement
- **Virus management** – community cohesion, social distancing, lockdown, 3T capability (track, trace, test)

**Management of deaths**
- **Processes** – mortuary provision, body management, disposal, affect on death management professionals
- **Bereavement support** – faith and cultural norms, support/counselling, commemorate/memorialise death

### Economic

**Economic strategy (national and local)**
- **Inward economies** – trade, tourism, travel, inter/national students, foreign labour, investment
- **City reputation** – perception of safe city, relationships and influence, economic uncertainty, momentum

**Business regeneration/rejuvenation**
• **Staff** – safe work, health and safety, attitude to risk, fairness, staff availability, transport to work, furlough
• **Finances** – supply/demand, impact on operations (disruption, opportunity, logistics), business continuity

**Public sector**
• **Political priority** – elected member confidence, subsidiarity practices, funding link to strategic priorities
• **Finances** – uncertain income (budget, generation, recouping cost) and expenses (normal, exceptional)

**Voluntary, community and social enterprise sector**
• **Fragility** – uncertainty of income, limited income streams, staff/volunteers shielding, new volunteers
• **Activities** – rapid response, overwhelming demand, local authority collaboration, training, commissioning

**Personal finance**
• **Income** – salaries, job security, dividends, sole traders finances, savings, demographics, impact of support
• **Household assets** – security of savings, investments (pension/house value), living cost, disposable cash

**Innovation**
• **Enablers** – investment/funding, staff availability, market opportunities, infrastructure, sharing intelligence
• **Environment** – C19 initiatives (furlough, grants, tax interventions), business confidence, industrial policy

**Infrastructure**

**Infrastructure providers**
• **Provider** – worker safety, capacity/demand of service, partnerships, infection control, innovation capacity
• **Maintain provision** – resilience, repair, staff/skills availability, investment, planning/response/recovery

**Infrastructure customers**
• **Users** – risk perception, safe operating practices, customer service, inclusion/exclusion of groups
• **Alternatives** – comparison/popularity of alternatives, adapt to new routines, barriers to adoption

**Energy (utilities)**
• **Demand** – changing Individual and organisational use (peaks, extended home stay, using private transport)
• **Environmental impact** – use different energy sources, supplier cooperation, emphasise carbon neutral

**Digital**
• **Cyber safety** – confidence, data protection, investment in resilient infrastructure, data sharing protocols
• **Use** – accessibility, digital skills, bandwidth, 5G roll out, company ability to migrate online, whole system

**Workforce/ staffing**
• **Behavioural** – health practices, staff fears, perceived safety, effects of social distancing and safe working
• **Measures** – adequacy of hygiene/safety measures, infection control, transmission rate at work

**Urban infrastructure**
• **Utilisation** – public confidence, footfall, event safety, ‘Friday night culture’, legislate unused space use
• **City management** – effect on construction, investment, leisure, homelessness, housing, culture, digital

**Health systems**
• **Provision** – safe/remote access to clinical/community health services, online consultation/assessments
• **Health outcomes** – inequalities, disadvantaged communities, BAME, integrated health/social care delivery

**Education and training**
• **Providers** – regional variations (equalities, culture), level of provision (childcare to university, vocational)
• **Virus fears – concerns** (student, teacher, parent), access, advancement, attendance, attainment

**Welfare (including social care)**
• **Poverty** – access to welfare support systems, energy/food poverty, hidden communities
• **Care homes** – hospital discharges, infection control design, PPE provision, access regime, staff skills
Transport
- *Commuting* – adaptation to new routine, accessibility, alternatives, perception of safety, virus protection
- *Adaptations* – repurpose car parks, bicycle storage, utilisation of public transport, social distancing, repair

Waste management
- *Behaviour change* – recycling, food waste, action in lieu of service change, effect of panic/impulse buying
- *Virus-specific* – disinfecting surfaces, treating medical waste (e.g. PPE), personal hygiene in handling waste

Supply chains & logistics
- *Competing agendas* – innovation, social responsibility, international cooperation, inventory management
- *Flexibility* – new markets, demanded items (PPE), pre-position for second wave, repurpose supply chains

Environment

Urban planning
- *Sustainable urbanisation* – new infrastructure (bus lanes, safe cycle), pedestrianisation, pocket parks
- *Health benefits* – changes in physical/mental fitness regimes, public access to green spaces and pathways

General environment
- *Health and safety* – less traffic incidents, clean streets, vulnerabilities, effect of social restrictions and use
- *Green spaces* – space access (use, proximity, leisure), cultural shift (attitude, behaviour, community spirit)

Clean environment
- *Clean infrastructure* – low carbon agenda (train electrification), low waste, reduced pollution, car use
- *Sustainable living* – climate impacts, green homes, tree planting, appreciation of green space

Communication

General communications
- *Public channels* – multiple media (to households, organisations, communities), public exchanges, fatigue
- *Trust* – officials trust in public, public trust in advice, contradictory action by public figures, misinformation

Targeted communications
- *Stakeholder management* – local versus national messages, engagement/receptiveness of audiences
- *Message content* – clarity and diversity of content, languages, impaired audiences, four nation differences

Connectivity between Health and the wider system
- *Public communication* – scientific advice, confusion, clarity/confidence in strategy, receptivity to messages
- *Partner communication* – share data/information for decision making, partnership strength, transparency

Governance and legislation

Legislation
- *Public response* – confusion, adherence to social distancing, four nations approaches, compliance
- *Transition to pre-COVID legislation* – potential for rapid innovation, science-led policy, consultation

Planning for recovery
- *Recovery* – reinstating operations, learning lessons for recovery, planning for the next emergency
- *Renewal* – ambition for recovery

Risk
- *Risk understanding* – updating risk profiles, managing risks, new behaviours, fatigue
- *Procedures* – planning for concurrent/future emergencies, depleted resources

Governance (national and local)
• Political – where influence lies, local power/desire, national/local alignment, ongoing national initiatives
• Leadership – aligned interests, budgets, reduced bureaucracy, responsibilities, perception of competence

Justice and law enforcement
• Community cohesion – compliance, trends (e.g. crime, abuse, compliance), disorder post-lockdown
• Enforcement powers – access/backlogs to justice, victims support, prison release, policing

Emergency planning
• Partnership working – command structure, data sharing, debriefs, resource availability (PPE, facilities)
• Preparing for next emergency – second wave, concurrent incident), system performance, resilience levels

Legal and financial frameworks for response
• Financing – emergency assistance, response/recovery budgets, strategic investment, short-term needs
• Privacy – trade-off between privacy and health impacts, test/track/trace systems, legal proceedings

Learning lessons
• Sharing culture – reflexivity, cross-sector dialogue, (inter)national practices, debriefs, sharing widely
• Processes for learning – system-wide opportunities, post-crisis review, public involvement, logging learning
Briefing B. Lessons you may find helpful from across the world

We provide the lessons under six categories, with sub-categories for ease of reference. We have selected lessons that are of specific interest to the recovery process although many also relate to the response phase, and the likely overlap between response and recovery.

This week our lessons on humanitarian assistance focus on vulnerable people including those in care homes and the youth. Economic lessons include those on business regeneration including support for small and local enterprises. Infrastructure lessons focus on urban planning in informal settlements with scarce resources, equitable infrastructure and spontaneous supply chains. Environmental lessons address our relationships with the natural world and the impacts of this on disease transmission, and the importance of planning for climate emergencies and COVID-19. Communications lessons focus on test, track and trace, and providing legal advice. The governance and legislation section includes lessons on areas to consider for impact assessment.

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<tr>
<td>Vulnerable people</td>
<td><strong>Consider how to protect vulnerable people and staff in care homes.</strong> See Case Study 1.</td>
<td>UK</td>
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</table>
| Vulnerable people             | **Consider how the needs of the youth can be met.** The youth may have vulnerabilities that include:  
  - Safeguarding concerns e.g. those with special educational needs, carers  
  - Exposed to domestic abuse, financial pressures and poverty, and additional caring responsibilities  
  - Limited access to computers for studies  
  - No internet access or costly data packages  
  - Reliance on public hotspots (currently unavailable)  
  Consider:  
  - Free, publicly available internet as part of corporate, and social responsibility providers  
  - Strategic investments that promote the safety of youth and information to counteract 'fake news'  
  - Wellbeing and safety of youth via specialised youth work during/post COVID-19 for those at risk of domestic abuse or exploitation (gangs, sexual)  
  - Creatively engage with youth through established organisations (schools, Youth Parliament and Young Peoples Foundations, community, faith-based organisations)  
  - Review of additional risks and legalities from COVID-19 legislation, in particular those ‘at risk’ of offending due to lack of understanding and communication aimed at youth  
  - Youth engagement in future recovery and renewal plans to co-develop preventative plans to support meaningful transitions to education, employment and training | UK             | Nadine Travers, Care Worker  
## Recovery: Categories of impact

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| **Consider how to manage policing requirements as a result of COVID-19.** In Argentina, there has been a sharp rise in cybercrime directed at the elderly. Consider:  
- Restructuring sections of the police force to incorporate more officers to reinforce cybercrime investigations  
- Preventive and participatory approaches to reducing crime through participatory security mapping. This combines crime data, geography and local knowledge to help protect people vulnerable to this type of crime  
- Recruit retired police officers to help cope with the demands of COVID-19 – this has a positive impact on officers’ mental health. | Argentina | Ministry of Government and Security |

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| **Consider continue addressing mental health and wellbeing issues of communities in recovery.** Such issues include loneliness and anxiety about returning to the outside world and recovering from the physical impacts of the disease. Consider:  
- Maintain coordinating arrangements with the charity and non-profit sector to support those suffering with physical and mental health impacts of COVID-19  
- Share information about vulnerable populations with non-profit and the charity sector where they have permission so that they are able to offer appropriate support  
- Retain communication channels such as hotlines to facilitate community engagement  
- The needs of those who have survived COVID-19, thinking of the mental health impacts such as fear of going outside, and physical impacts such as organ scarring, impaired vision and mobility, which may require ongoing support | Australia | UNDRR: City Resilience Stories  
Portugal | Social Welfare Department |

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<tr>
<td><strong>Consider ways to work with local businesses to offer advice on incentivizing consumers.</strong> In China, all major stores have provided discount vouchers to consumers that are readily available on a commonly used App. QR discount codes are also readily on display in many shop windows so customers can scan the code and receive a discount in store. The government is encouraging stores to offer large discounts to consumers.</td>
<td>China</td>
<td>International engagement officer</td>
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| Business regeneration         | Consider measures to ease businesses’ cash flows. Consider:  
  ▪ Enhance Small – Medium Enterprise loans and provide businesses with continuous access to credit during these hard times  
  ▪ Require that banks and finance companies which apply for low-cost government funding to pass on the savings to their borrowers  
  ▪ Improve digital innovation to support and enable SMEs to access global markets via business to business (B2B) or business to consumer (B2C) digital channels, and to participate in B2B marketplaces so as to benefit from overseas procurement demand | Singapore       | Civil Protection  
| Equitable economic regeneration| Consider how to support interlinked local businesses to ensure equitable economic regeneration. In Colombia, a programme to support rural agricultural production and urban restaurants has been developed. With the support of local government, produce that is normally sold at farmers markets is now being sold to restaurants. Restaurants have transformed into mini food markets within their local neighbourhoods. This has helped to meet local food demands, provided a market for local produce and maintained community cohesion. | Colombia        | Chief Resilience Officer                                                                 |

### Infrastructure

| Urban infrastructure | Consider action to mitigate the exacerbation of inequalities in future infrastructure decisions for recovery from COVID-19. Consider:  
  ▪ Ensuring equality of access to internet through roll out of fibre-optic cables for internet – evenly distributed throughout areas  
  ▪ Supporting housing by restricting use of new housing for 'land banking' where property is bought as investment rather than as primary residence | All             | New Cities NGO                                                                 |

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Briefing 9: week beginning 1st June 2020
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</table>
| Urban planning | **Consider how to support community driven solutions in informal settlements.** Consider opportunities to:  
  - Ensure public health measures (testing, contact tracing, etc.) are underpinned by action guaranteeing livelihoods and food security  
  - Facilitate collaboration between local governments, utility providers, and community groups to ensure affordable access to water and sanitation for all  
  - Raise awareness and behaviour change in informal settlements and slums through participation and community ownership of initiative  
  - Advocate for measures to reduce the burden of rent and mortgages, provide temporary shelter for the homeless, and repurpose buildings to isolate those infected  
  Support local governments to manage safe urban mobility and transport, with a focus on those serving communities in informal settlements, while observing any movement restrictions | All | [https://unhabitat.org/un-habitat-covid-19-response-plan](https://unhabitat.org/un-habitat-covid-19-response-plan) |
| Supply chain management | **Consider how to manage and integrate 'spontaneous supply chains'.** Spontaneous supply chains (SSC) emerge during a crisis to meet unmet demand. They may fill a gap locally or nationally i.e. transformation in manufacturing and production. In the USA, Amish communities have shifted their production from woodwork and carpentry organised by men, to the production of facemasks by women. Women were sewing up to 50,000 face masks per day that met hospital sanctioned quality control  
  Consider:  
  - How SSC can be integrated into formal supply chains to ensure quality and efficiency  
  - How SSC can be integrated into local government efforts. Many SSCs are locally driven and so integration into existing local supply chains would increase their efficiency and effectiveness  
  - How to build firm-frim relations to support SSC integration e.g. building trust, developing contracts, designing management systems  
  - Opportunities for staying connected to local communities that have capacity to support | All | USA | Mennonite Disaster Service |

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Briefing 9: week beginning 1st June 2020

The University of Manchester, Oxford Road, Manchester, M13 9PL, UK
<table>
<thead>
<tr>
<th>Recovery: Categories of impact</th>
<th>Actions</th>
<th>Country/Region</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental</td>
<td>Consider early scenario planning for potential concurrent climate emergencies. Colombia is expecting El Niño, a climate cycle that will result in drought. Local government has brought together a climate change committee with academics and experts to inform local action on the impacts of water shortages and power loss during COVID-19. Consider:</td>
<td>Colombia</td>
<td>Chief Resilience Officer</td>
</tr>
</tbody>
</table>
| General environmental | ▪ Running tabletop exercises that model water shortages and energy loss alongside the pandemic and its impacts on hospitals, cleaning infrastructure and public health  
▪ Scenario planning that considers different states of lockdown and the impacts of COVID-19 and a climate emergency  
▪ Scenario planning that considers the socio-economic impacts of COVID-19 and a climate emergency  
▪ Public campaigns on conservation of water and energy, and how to manage these during a climate emergency |  |  |
| General environmental | Consider the relationships between epidemics and threats to ecosystems and wildlife. Degraded habitats can encourage faster evolutionary processes and disease diversification, because pathogens spread more easily. Consider: | All |  |
| General environmental | ▪ The risk of developing into habitats into largely undisturbed places where viruses are transmitted more easily  
▪ Conservation of natural barriers between virus host animals—in which the virus is naturally circulating—and people.  
▪ Controlling markets that sell live animals where possible. In countries that rely on markets due to older infrastructure (e.g. no refrigeration), focus on the provision of health care and education on the safety of eating certain species  
▪ Develop ties with local communities to address behaviours around conservation, disease and wild animal consumption  
▪ Communicate the risks of pathogens and disease to hunters, loggers, market traders and consumers |  | [https://www.scientificamerican.com/article/destroyed-habitat-creates-the-perfect-conditions-for-coronavirus-to-emerge/](https://www.scientificamerican.com/article/destroyed-habitat-creates-the-perfect-conditions-for-coronavirus-to-emerge/) |
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<th>Country/Region</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication</td>
<td>Test, track and trace</td>
<td>Japan</td>
<td><a href="https://sdc.csis.u-tokyo.ac.jp/">https://sdc.csis.u-tokyo.ac.jp/</a></td>
</tr>
<tr>
<td></td>
<td>Consider partnerships with telecom companies for effective use of telecom data to help test, track and trace. Telecom data cover large populations and uses pre-existing technology that can be used to understand mobility patterns and human behaviour in near-real-time. Indicators from telecom data can inform provide information about:</td>
<td></td>
<td><a href="https://github.com/SpatialDataCommons/CDR-analysis-tools-std">https://github.com/SpatialDataCommons/CDR-analysis-tools-std</a></td>
</tr>
<tr>
<td></td>
<td>- The number of people visiting hotspots</td>
<td></td>
<td><a href="https://shiba.iis.u-tokyo.ac.jp/member/ueyama/mm/">https://shiba.iis.u-tokyo.ac.jp/member/ueyama/mm/</a></td>
</tr>
<tr>
<td></td>
<td>- Where those visiting hotspots came from</td>
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<td></td>
<td>- Where they went afterwards</td>
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<td></td>
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<tr>
<td></td>
<td>- How restrictions have impacted populations’ movements</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- How many people are away home and for how long</td>
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<td></td>
<td>This can provide localised information on track and trace, and may be particularly useful for countries with less well developed infrastructure and access to smart technology.</td>
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<tr>
<td>Targeted communication</td>
<td>Consider how to communicate free legal advice to citizens. In France, The National Bar Council created a voluntary telephone service to help and assist individuals and companies with legal issues related to the impacts of COVID-19. Legal advice covered family law such as parental access to see a child under lockdown, and labour law including defaulting on business loans, and access to government assistance.</td>
<td>France</td>
<td><a href="https://www.lemonde.fr/societe/article/2020/04/08/coronavirus-une-hotline-d-avocats-pour-aider-particuliers-et-entreprises_60359513224.html">https://www.lemonde.fr/societe/article/2020/04/08/coronavirus-une-hotline-d-avocats-pour-aider-particuliers-et-entreprises_60359513224.html</a></td>
</tr>
<tr>
<td>Governance and legislation</td>
<td>Emergency planning</td>
<td>UK</td>
<td>The Manchester Briefing</td>
</tr>
<tr>
<td></td>
<td>Consider the different areas for which an Impact Assessment of COVID-19 response and recovery strategies could be commissioned. Annex A of this week’s ‘Briefing A’ contains a menu of impact themes and impact areas that could be used to help local government plan an impact assessment.</td>
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Briefing C: Case Study – Supporting care homes in the UK

PPE shortages, lack of testing, and a vulnerable population have seen care homes in England and Wales become hotspots of the COVID-19 epidemic. The impacts of COVID-19 have been hugely disruptive in the care home sector; affecting patients and all aspects of care. The context of these challenges has been attributed to:

- A decline in funding for social care in the past 10 years, even as demand for care has risen as a result of an ageing population
- Daily ~1.5 million older people – one in seven over-65s – go without the help they need with tasks such as washing, dressing and eating
- Deaths in care homes (from all causes and Covid-19) are increasing - the increased community deaths reflects the prioritisation of social care
- Moving such populations out of hospitals during Covid-19 means systems pressures are pushed elsewhere including into the community:
  - people were reportedly discharged from hospital to care homes without testing for Covid-19
  - people who became ill in care homes were largely not tested for the virus and most were not admitted to hospital

The UK Government has stated that their number one priority for adult social care is infection control during the COVID-19 pandemic. While mitigating the spread of the disease is of paramount importance, protective measures such as isolation are associated with a morbidity of its own. The lack of supervision as a result of staff shortages put care home residents at increased risk of injury and mental health issues, for example those with dementia often stop eating as a result of depression which can hasten death.

Before the UK Government released their Plan to Rebuild which includes a section on protecting care homes, a number of actions were identified within the sector to address growing concerns over how COVID-19 was being managed in care homes.

Actions to address the situation for care homes include:

- Central/local government and the care home sector should work together to make testing in care homes happen.
- More PPE, testing and funding to:
  - Ensure care home residents are safeguarded
  - Prevent avoidable hospital admissions

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1. https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)31199-5/fulltext
7. https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)31199-5/fulltext
- Improve the mental health of families who may be worried that their relatives in care do not have the support they need.  

- More guidance for care home managers on:
  - Receiving residents from hospitals when they have not been tested
  - Permitting relatives to say goodbye to loved ones
  - Preventing staff making a dozen home visits a day - potentially spreading virus
  - Facilitating staff speaking out about unsafe conditions (five carers reportedly lost their jobs in the past fortnight after speaking out about their concerns)

- In Scotland, the Care Inspectorate (the sector’s regulator) would examine every care home’s conduct during the pandemic.

- Social care should be viewed as part of healthcare and vice versa.

- Nurses are working continually on helplines to support families affected.

- Consider relatives’ visitation/entry permissions to nursing homes as lockdowns ease:
  - Limit the number of visitations per week and permit only one family member to visit at a time
  - Prevent children and young people (under 14) from visiting
  - Require visitors to reserve a time-slot and not allow visitors unless they have made a reservation
  - Space visitors throughout the day and across the week to preserve social distancing
  - Prevent entry to visitors if they are ill, under quarantine or in isolation, or if they are waiting for the results of COVID-testing
  - Escort each visitor to use hand sanitizer on entering the care home and on departure
  - Escort each visitor to the resident’s room and back without stopping in the common areas
  - Visitors must adhere to the 2-meter distance regulations, and avoid direct contact with other care home residents
  - Urge visitors to download the COVID tracing app to their smartphone
  - Adapt this advice to circumstances of each care home (e.g. the size of the home, the situation at any given time, the number of confirmed infections in the local community)

The call to address these actions has been met by £3.2bn of additional funding for local authorities from the UK Government, which can be used to meet rising care home and additional pressures on social care. Additionally, further £1.3bn has been provided for the NHS and local authorities to work together to fund the additional needs of people leaving hospital during the pandemic. The Governments priority areas are:

1. Testing;
2. Infection prevention and control;
3. Workforce expansion through a recruitment campaign;
4. Clinical support through accelerated introduction of enhanced health support in care homes from GPs and community health services;
5. Guidance.

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10 Dementia UK [https://www.dementiauk.org/coronavirus-care-home-deaths-up-hospital-cases-fall-our-response/]
11 [https://www.theguardian.com/commentisfree/2020/may/03/the-observer-view-on-care-home-deaths-being-an-indictment-of-our-society]
12 Dementia UK [https://www.dementiauk.org/coronavirus-care-home-deaths-up-hospital-cases-fall-our-response/]
# Briefing D: Useful webinars

<table>
<thead>
<tr>
<th>Taken place in the past week</th>
<th>Webinar Title</th>
<th>Link to presentation</th>
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## Coming up

<table>
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<tr>
<th>Date</th>
<th>Webinar Title</th>
<th>Link to registration</th>
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</thead>
<tbody>
<tr>
<td>16.6.2020</td>
<td>Alliance Assembly Webinar: Scaling Cities Climate Finance in the Context of COVID-19</td>
<td><a href="https://climatepolicyinitiative.zoom.us/meeting/register/tJUkdeuuqMjH9YjvB-4OeSfNLafZrHLHdn">https://climatepolicyinitiative.zoom.us/meeting/register/tJUkdeuuqMjH9YjvB-4OeSfNLafZrHLHdn</a></td>
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